IN THE UNITED STATES PATENT AND TRADEMARK OFFICE (Case No. 05-061)

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SEP 0 9 2005

In the Application of:

William A. Bernard

Serial No.: 10/646,115

Filing Date: August 22, 2003

For: Cable Duct Coupler

Examiner: Kimberly Wood

Group Art Unit: 3632

Fax No. 703-872-9306

No. of Pages: 2

FACSIMILE TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In regard to the above identified application,

- 1. We are transmitting herewith the attached:
 - a) Petition for Extension of Time.
- With respect to fees:
 - a) Please charge my deposit account no. 13-2490 in the amount of \$1020.00.
 - b) Please charge any underpayment or credit any overpayment our Deposit Account, No. 13-2490.
- 3. CERTIFICATE OF MAILING UNDER 37 CFR § 1.8: The undersigned hereby certifies that this Transmittal Letter and the paper, as described in paragraph 1 hereinabove, are being transmitted to the USPTO facsimile number 703-872-9306, according to 37 CFR 1.6(d) addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on September 9, 2005.

By:

Respectfully submitted,

Date: September 9, 2005

Donald L. Zuhn

Reg. No. 48,710

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McDonnell Boehnen Hulbert & Berghoff LLP 300 South Wacker Drive Chicago, IL 60606 (312) 913-0001

9 2005

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			
		Attorney Docket No.:	05-061
ADDRESS T	0:	Application No :	10/646,115
Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450		Filing Date:	August 22, 2003
		First Named Inventor:	William A. Bernard
		Group Art Unit:	3632
		Examiner:	Kimberly Wood
period desired): One Month (37 CFR 1.17(a)(1)) \$ Two Months (37 CFR 1.17(a)(2)) \$ Three Months (37 CFR 1.17(a)(3)) \$1020 Four Months (37 CFR 1.17(a)(4)) \$ Five Months (37 CFR 1.17(a)(5)) \$ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ A check in the amount of the fee is enclosed. The Commissioner is hereby authorized to charge any fees which may be required or to credit any overpayment to Deposit Account Number 13-2490. I have enclosed a duplicate copy of this sheet.			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
Name Reg. No.	Donald L. Zuhn 48,71 0		
Signature	wheel 2.	Jm -	
Date	September 9, 2005	7	

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